



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

INFORMATIONAL LETTER NO.1293

TO: Iowa Medicaid Pharmacies Billing Electronically

FROM: Iowa Department of Human Services, Iowa Medicaid Enterprise (IME)

DATE: September 16, 2013

SUBJECT: Iowa Medicaid Pharmacy NCPDP D.Ø Payer Sheet and Guidance
Updated Information Shown as Highlighted Below

EFFECTIVE: September 23, 2013

Changes to the payer sheet for data submission will be effective for all Iowa Medicaid pharmacies on September 23, 2013.

Below are the changes identified with the Pharmacy Point of Sale upgrade (IAPOS v6.Ø). Guidance for the POS upgrade is included within the payer sheet as well as in this Informational Letter.

The payer sheet including instructions can be found on the www.iowamedicaidpos.com website on the Provider Information page.

SEGMENT AFFECTED	FIELD #	FIELD NAME	D.Ø USAGE	EXPLANATION OF CHANGE
Field Modifications				
REQUEST CLAIM	4Ø3-D3	FILL NUMBER	R	Only Ø for a C-II drug accepted; patients of Nursing Homes are exempt
REQUEST CLAIM	414-DE	DATE PRESCRIPTION WRITTEN	R	Date written must be within 6 months of date of service for controlled drugs, 18 months for non-controlled drugs
REQUEST CLAIM	3Ø8-C8	OTHER COVERAGE CODE	RW	If a '3' is submitted there should be a minimum of 1 Other Payer Reject Code (472-6E)

				submitted and no Other Payer-Patient Responsibility Qualifier field (351-NP) submitted.
REQUEST CLAIM	461-EU	PRIOR AUTHORIZATION TYPE CODE	RW	Valid values: Ø, 1, and 2. '4' no longer used to indicate pregnancy after DOS 9/22/13, only 335-2C denotes pregnancy. '8' obsolete after DOS 9/22/13. All other values will reject.
REQUEST CLAIM	462-EV	PRIOR AUTHORIZATION NUMBER SUBMITTED	RW	Med Cert 4 no longer used to indicate pregnancy after DOS 9/22/13, only 335-2C denotes pregnancy.
Removed Fields				
REQUEST CLAIM	453-EJ	ORIGINALLY PRESCRIBED PRODUCT/SERVICE ID QUALIFIER	RW	Not used
REQUEST CLAIM	445-EA	ORIGINALLY PRESCRIBED PRODUCT/SERVICE CODE	RW	Not used
REQUEST CLAIM	446-EB	ORIGINALLY PRESCRIBED QUANTITY	RW	Not used

GENERAL INFORMATION AND GUIDANCE

Standards list

Iowa Medicaid's Point of Sale is based on the following standards:

1. NCPDP Telecommunications Standard Version/Release D.0 Published October 2010
2. NCPDP Data Dictionary Published July 2007
3. NCPDP External Code List Published October 2011
4. NCPDP Emergency Telecommunication External Code List Value Addendum Published July 2013

Transmissions

Refer to the NCPDP Telecommunication Standard Implementation Guide Version D.0 for the structure and syntax of the transaction(s) within the transmission.

Segments

Each segment is listed as mandatory, situational, or optional for a given transaction in the NCPDP *Telecommunication Standard Implementation Guide*. If the segment is mandatory for a given transaction, that segment must be sent. If the segment is situational, the situations outlined in the guide must be followed for use.

Fields

M-Mandatory Fields

If a field is designated as "M" (Mandatory) on the payer sheet, the field is mandatory for the segment in the transaction. Mandatory elements have structural requirements and are the **only** fields that have the "Mandatory" designation on the payer sheet. These fields must be submitted.

R-Situational Fields – Required

If a field is designated as "R" (Required) on the payer sheet, the field has been designated as "Required" for the Segment in the designated transaction. The "Value" column of the template may contain instructional material.

RW-Situational Fields – Qualified Requirement

If a field is designated as "RW" (Required When) in the payer sheet, the field may be used according to the situations defined on the payer sheet, or not used.

We encourage providers to go to the website at www.iowamedicaidpos.com to view all recent changes to the payer sheet. If you have questions, please email POSTechSupport@ghsinc.com or call 877-553-8455 indicating needed support for Iowa.